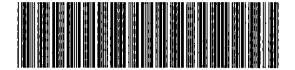
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(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	9 #)
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☐ PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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Special Instructions to	Filing Officer:	;
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W17 366		rn

Office Use Only



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FILED

2014 JUN 24 PM 3: 38

SECRETARY OF STATE

K. SALY EXAMINER JUN 2 6 2014



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 12, 2014

MIKE BOUNOS 104 19TH ST. BELLEAIR BEACH, FL 33786

SUBJECT: VECTOR RESOURCES LLC

Ref. Number: W14000036682

We have received your document for VECTOR RESOURCES LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 814A00012804

COVER LETTER

Division of C	corporations		
SUBJECT: Vector	Resources LLC		
SCHOLCI.		of Resulting Florida Limite	ed Company)
			nd fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corn	espondence concernin	g this matter to:	
Mike Bounos			
	(Contact Person)		
	(Firm/Company)		
104 19th st			
	(Address)		
Belleair Beach Fla	. 33786		
(City, State and Zip Code)		
vectorllc@verizon.	net		
E-mail Address: (to b	e used for future annual re	port notifications)	
For further informati	on concerning this ma	tter, please call:	
MIKE SON	NOS act Person)	at (7)7 (Area Code) (Day	time Telephone Number)
Enclosed is a check	for the following amou	int:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES Registration Section	S:	MAILING A	

Division of Corporations

Tallahassee, FL 32314

P. O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

TO: Registration Section

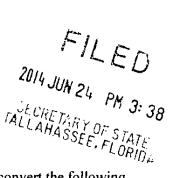
Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company



The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Cor Vector Resources LLC #MOIO 000003472	nversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a LLC .	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
First organized, formed or incorporated under the laws of Delaware	
June 19th 2006 (Enter state, or if a non-U.S. entity, the name of the	ne country)
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of O	rganization:
Vector Resources LLC	
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date: Upon Filing.	
(The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days date this document is filed by the Florida Department of State; <u>AND</u> 2) must be the same as date listed in the attached Articles of Organization, if an effective date is listed therein.)	
5. The plan of conversion has been approved in accordance with ss. 605.1041-605.1046.	

Page 1 of 2

Signed this 30 day of May	20_14	FILE
Signature of Authorized Representative of Li	mited Liability Company:	2014,11111
Signature of Authorized Representative: /// Printed Name: Mike Bounos	Title: Mgrm	2014 JUN 24 PM 3:38 - MALLAHASSEE, FLORIDA ature(s).
Signature(s) on behalf of Other Business Entity		ature(s).]
Signature: White Sunu Printed Name: Mike Bounos	Title: MGBR	
Signature: Multi-Service Printed Name: Luz Stella Bounes		
Signature: V2. Social Services	Title: ANBA	
Signature: Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature: Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an	or Officer. Incorporator must sign.	
If Florida General Partnership or Limited Liab Signature of one General Partner.	uity Partnersnip:	
If Florida Limited Partnership or Limited Liab Signatures of ALL General Partners.	ility Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		
Articles of Conversion: Fees for Florida Articles of Organization Certified Copy: Certificate of Status:	\$25.00 : \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

"LLC.") Limited Liability Company is:
Limited Liability Company is:
Emitted Elacinty Company is.
<u> </u>
red Agent's Signature: gnate an individual or another
一 一
- SSE
HASSEE FI
FILED 2014 JUN 24 PK 3: 38 SECRETARY OF STATE TALLAHASSEE FLORIO
,

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Mike Bounos
AMBR	Luz Stella Bounos
(Use attachment if necessary)	
	in the date of filing: <u>Upon Filing</u> . (OPTIONAL) The specific and cannot be more than five business days p
90 days after the date of filing.)	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE: Signature of a mer (In accordance with section 605.02) constitutes an affirmation under the I am aware that any false information constitutes a third degree felony as a	mber or an authorized representative of a member. 03 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. on submitted in a document to the Department of State provided for in s.817.155, F.S.) **Example: Typed or printed name of signee*

The name and address of each person authorized to manage and control the Limited Liability

\$125.00 Filing Fee for Articles of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)
Page 2 of 2

ARTICLE IV-